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Bib Data Sheet

CONFIRMATION NO. 8636

SERIAL NUMBER 09/843,941	FILING DATE 04/30/2001 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 6530.0278
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## APPLICANTS

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 Eric Schneider, Albion, RI;

\*\* CONTINUING DATA \*\*\*\*\*  
*more*\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*more*IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 06/25/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
MN	6	46	4

## ADDRESS

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## TITLE

Endoscopic stent delivery system and method

FILING FEE RECEIVED 1258	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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